

HEALTH & HUMAN SERVICES COMMITTEE

of the

Suffolk County Legislature

Minutes

A regular meeting of the Health & Human Services Committee of the Suffolk County Legislature was held in the Rose Y. Caracappa Legislative Auditorium of the William H. Rogers Legislature Building, Veterans Memorial Highway, Hauppauge, New York, on August 17, 2006.

Members Present:

Legislator Eli Mystal • Chairman
Legislator Steve Stern • Vice•Chair
Legislator Jack Eddington
Legislator Edward Romaine
Legislator John Kennedy

Also in Attendance:

George Nolan • Counsel to the Legislature
Ian Barry • Assistant Counsel to the Legislature
Renee Ortiz • Chief Deputy Clerk/Suffolk County Legislature
John Ortiz • Senior Budget Analyst/Budget Review Office
Fran Siems • Aide to Presiding Officer Lindsay
Paul Perillie • Aide to Majority Caucus
Deborah Harris • Aide to Legislator Stern
Ben Zwirn • Assistant County Executive
Brendan Chamberlain • County Executive's Office
Dennis Brown • County Attorney's Office
Janet DeMarzo • Commissioner/Department of Social Services

Linda O'Donohoe • Assistant to the Commissioner/Dept of Social Services
Vicki Mo • Director•Family & Children Services/Dept of Social Services
Jim Farrell • Family & Children Services/Department of Social Services.
Dr. David Graham • Chief Deputy Commissioner/Dept of Health Services
Len Marchese • Director of Management & Research/DHS
Sandy Sullivan • Legislative Director/AME
Susan Eckert • United Cerebral Palsy of Suffolk
Steve Moll • Island Public Affairs
Karen Miller • Huntington Breast Cancer Action Coalition
Terry Smith • Dolan Family Health Center
Joe DeVincent • Town of Huntington
Cliff Hymowitz • Chairman/Transportation Advisory Board
All Other Interested Parties

Minutes Taken By:

Alison Mahoney • Court Stenographer

(*The meeting was called to order at 1:08 PM*)

CHAIRMAN MYSTAL:

Please rise for the Pledge of Allegiance led by Legislator Stern.

Salutation

Good afternoon, Ladies and Gentlemen. This is the meeting of the Health & Human Services Committee. Thank you for coming and thank you for putting up with the delay.

We have two presentations today and a short agenda. I wanted to know if anybody •• if any •• if Commissioner, would you •• I don't know if the Commissioner wants to speak first. No. Anybody else from the Health Department want to say anything? No. Okay, then we'll go with the presentation. Mr. Cliff Harowitz.

CHAIRMAN MYSTAL:

Hymowitz; I'm sorry, Mr. Hymowitz.

MR. HYMOWITZ:

No problem. Okay, is it on? Hello. It's on now, okay.

Chairman Mystal and members of the Health & Human Services Committee. My name is Clifford Hymowitz and I come to you today as Director of Long Island Concerned Citizens for Public Transportation and the Chairperson of the Transportation Subcommittee of the Suffolk County Disability Advisory Board. I only mention that because I wear a lot of different hats and I want to make sure that it's perfectly clear that I'm here representing the organization.

The following are excerpts from the Office of Handicapped Services website. The primary mission of the Suffolk County Office of Handicapped Services is to work for the benefit of Suffolk County's 283,000 people with disabilities. Office responsibilities include coordinating County services, people with disabilities, developing programs that assist people with disabilities in becoming more self-sufficient, advocating for changes to resolve issues facing the disabled, provide information and referrals to County residents with disabilities and provide specialized services not available through other County departments. In addition, the office ensures County government compliance with Federal mandates under the American with Disabilities Act.

As a transportation advocate that is an active member of the Disability Advisory Board, I have been offering to assist in assuring that the mission of the office is fulfilled. For eight years now the office had declined to accept my assistance or offer any assistance from their office in regard to this matter, the answer always goes, "Go somewhere else." Over the years, as a certified user of Suffolk County accessible transportation, I have never received any correspondence from the office advising me of changes in phone numbers, revisions of policy and most recently a notification of the addition of the IVR system, a voice recognition software enabling riders to confirm and cancel trips that was put into place, or the fact that a password and ID number is required for use. To the best of my knowledge, nobody was notified as to what their password and ID number was. I recommended

to the Office of Handicapped Services, before this system was activated, to take a proactive action by letting people know ahead of time requiring information for proper use to minimize confusion.

Yearly, the Division of Transportation and the Office of Handicapped Services hosts a Federally•mandated public hearing about the County's compliance with the ADA in providing transportation. Year after year, when I surveyed people who said they were not going to attend, their reply was, "I was not notified in time to make my SCAT reservation." On 5/19/06, the Suffolk County Disability Advisory Board sent a letter to Bob Shinnick, Director of Transportation, inquiring about the possibility of establishing a SCAT Paratransit Point System, penalizing riders who do not follow procedures. Our system, like just about every system in the country, is critical by the number of no•shows which is when the driver makes the trip to pick a passenger and the passenger is either not there or had canceled their reservation less than two hours before the trip, as I did today because of the meeting running late, it was beyond my control.

As an educated advocate that attends yearly conferences and has had the opportunity to network with providers of similar systems as ours, I have found that there usually is a minimum number of people responsible for most of the amount of the no•shows and late cancellations. Tracking the statistics of our system, I have found the exact same scenario. Until the causes of the excessive number of no•shows and late cancellations are identified and resolutions are identified, the situation will not change. I have recommended the suggestion on more than one occasion.

The Office of Handicapped Services is the gatekeeper of the database of the residents of Suffolk County that have been certified eligible for SCAT use. Year after year the cause for the lack of the communication has been that the Office of Handicapped Services is perpetually understaffed to send out the necessary information and that no other organization or department is able to assist the office due to their assertion that they must protect the residents in the database right of privacy. The last Legislator who addressed this issue was Maxine Postal. What she did was have the Office of Handicapped Services print labels and her staff and her and she stuffed and labeled the envelopes.

On behalf of the eligible citizens of SCAT, I request the assistance of this committee to adopt a resolution that will address the criteria for selection of information and the method it is to be disseminated. With your cooperation, the residents of our County with disabilities will be kept informed and educated. Thank you very much.

LEG. ROMAINE:

Mr. Chairman?

CHAIRMAN MYSTAL:

Go ahead, sir.

LEG. ROMAINE:

I spoke with Cliff yesterday on the phone and he mentioned that he was coming to the committee today making a presentation. And his last sentence of his presentation, if you see, he's requesting the assistance of this committee to adopt a resolution that will address the criteria for the selection of information and the method that it is to be disseminated. Considering your experience as a staff member of the former Presiding Officer Maxine Postal, in trying to get this information out, perhaps this committee could ask Counsel to meet with Mr. Hymowitz and draft such a potential resolution that we could take a look at down the road. Just a suggestion, sir.

CHAIRMAN MYSTAL:

I have talked with Mr. Hymowitz and I think we need to do something to streamline the process. Mr. Hymowitz has been in my office and, again, statistically in terms of empirical data, it has been •• it is a small number of people who are responsible for the cancellation and for the no•shows, and I think the system is not capable of making rapid changes at this point. In other words, if somebody canceled two hours prior or somebody •• and sometimes they forget.

One other thing that we wanted to put together is more or less a system where somebody will call and find out if the person still needs a ride, two hours before they call and say, "Do you still need the ride or can we still pick

you up, are you going to be there?" Remember, we are talking about disabled people and a lot of them are also seniors, so we have a double disability to work with. Not that if you're a senior your disabled, but a double kind of ••

MR. HYMOWITZ:

Mobility impairment.

CHAIRMAN MYSTAL:

Mobility impairment. So we are •• I would like to •• I'm going to work with Mr. Hymowitz to see if we can •• and if you want to work with me, Mr. Romaine, I will be glad to work with you on that.

LEG. ROMAINE:

I'd be delighted to work with you. And possibly, as Mr. Hymowitz has requested, we can have Counsel look at drafting a resolution that will address the criteria for the selection for the information and the method by which it's going to be disseminated.

CHAIRMAN MYSTAL:

And as you can imagine, the problem •• you know, the problem takes a larger proportion as you move east. Yes?

LEG. ROMAINE:

You're raising the question.

CHAIRMAN MYSTAL:

I know. As you move east the problem becomes more and more pronounced because of the fact that, you know, in Brookhaven Town, a large area that they have to cover in Brookhaven and also on the east end. It's not something •• we do have the same problem in the western but it's less. I will work with you, Mr. Hymowitz, and we will put something together to streamline the communication problem.

LEG. STERN:

Mr. Chair?

CHAIRMAN MYSTAL:

Yes, sir.

LEG. STERN:

Mr. Chair, thank you. I would also suggest that since we have a brand new Department of Information Technology at the County level that perhaps we should utilize the resources of that office to best determine how we can convey very critical information to those in need throughout Suffolk County and utilize, again, the resources of that new department in that regard.

MR. HYMOWITZ:

I agree. Thank you very much for bringing that up.

LEG. KENNEDY:

Thank you, Mr. Chair. Cliff, thank you for bringing this issue to us. But I guess •• obviously I support the same kind of sentiment that's around the horseshoe here, but I want to ask you specifically, you talk about Maxine Postal's efforts as far as, you know, the staff to go ahead and actually physically do the labeling and the things necessary in order to get the communications out. I, as the rest of my colleagues here, are mindful of asking under staffed departments to continue to take on functions when their existing load doesn't get met now. That doesn't mean that what you're asking us is not important to do. But I guess I'm asking you then specifically, what are you looking to go ahead and try and improve or have happen at this point? Is it correspondence, is it telephone calls, is it e•mail; what in your opinion should be going on right now?

MR. HYMOWITZ:

Okay. Well, thanks to Legislator Stern, I was going to be presumptuous to assume that the County Exec staff would want to be involved in this. But in the minimum, what's required is a letter should go out to every certified citizen regarding any policy changes, changes in phone numbers or new systems that's incorporated.

LEG. KENNEDY:

Okay, then let me ask the next question then, and I'm going to ask my

colleagues to suffer. When you say certified, how is an individual deemed to be disabled or certified, is it an SSI recipient, is it somebody with a handicapped parking sticker; what's that process?

MR. HYMOWITZ:

First of all, having a disability does not make you eligible for SCAT. What makes you eligible is that your disability creates a mobility impairment which prevents you from being able to access a fixed route.

LEG. KENNEDY:

So we have a County•wide pool of individuals who have been deemed eligible to receive SCAT services.

MR. HYMOWITZ:

Not all of them use them ••

LEG. KENNEDY:

Understood.

MR. HYMOWITZ:

•• but they're eligible, and if they were more aware of the procedures they might use it.

LEG. KENNEDY:

And that pool is the pool that needs communication.

MR. HYMOWITZ:

Exactly.

LEG. KENNEDY:

Sounds simple; sounds like it ought to be just a simple mail merge.

MR. HYMOWITZ:

My point exactly.

LEG. KENNEDY:

Okay.

LEG. ROMAINE:

Mail merge or blast e-mail or something of that nature but, you know, the problem •• and not to interrupt, through the Chair •• the problem is that there are people, particularly in scattered communities on the east end, that are eligible. The transportation system on the east end is less than optimal, we don't have the same type of frequency of buses as they do on the west end because we have a disperse population. And it becomes very difficult for people who are mobility impaired to get services from the County, to even be aware of service, and if they're aware of services to be aware of policy changes that might affect their usage of that service. These are things that •• and the reason that this isn't being done, the reason that e-mail isn't being sent out or correspondence isn't being sent out, we set up these policies such as SCAT eligible and then we don't staff.

LEG. KENNEDY:

There's nobody to do it.

LEG. ROMAINE:

We do staff, I'm sorry; we provide jobs in the budget but then we allow them to be vacant.

LEG. KENNEDY:

And this is not •• that's another time for us to go ahead and lament that.

LEG. ROMAINE:

Fine.

LEG. KENNEDY:

But in this case where there's a specific request that's being brought forward, I guess through the Chair what I'm asking is, to kind of close the loop for my own understanding, who maintains that database of certified SCAT users?

MR. HYMOWITZ:

The Office of Handicapped Services.

LEG. KENNEDY:

Fine.

MR. HYMOWITZ:

Not Suffolk County Transit.

LEG. KENNEDY:

Then I'm going to defer to the Chair because he knows well how to go ahead and make the contacts, I'll make my office available through whatever means needs to be necessary; if it means helping to keypunch, if it means, you know, folding and stuffing, but it seems like a simple thing to me.

CHAIRMAN MYSTAL:

There are technologies in place. For example, most of you •• I won't say most of you, all of you who are an elected official at one point or another have encountered what they call returning phone calls, and I'm sure you don't pay somebody to return phone calls for you.

MR. HYMOWITZ:

Well, I think that's why it's a good •• I don't mean to interrupt, but I think that's why it's a good idea if I have the opportunity to sit down with Counsel and yourself and we hash out. Because as I'm sure you know, I do my homework and I will be prepared to make recommendations now that you have chosen to be responsive.

So I thank you very much and you made my day.

CHAIRMAN MYSTAL:

Thank you. Thank you, Mr. Hymowitz. Karen Miller.

MS. MILLER:

Thank you for the opportunity today. I hope I will have a few minutes because I believe I'm here to ask for your support to memorialize some State bills that I've been privileged to be a part of, and I'd like an opportunity to describe them.

CHAIRMAN MYSTAL:

Could you state your name for the stenographer so she knows.

MS. MILLER:

I'm Karen Joy Miller and I'm founder of Huntington Breast Cancer Action Coalition and founder of Prevention is the Cure. Thank you.

I have asked for a series, a large packet •• sorry, it's too much paper •• so that you can refer later because there's a lot of information. A lot of good things are happening on the environmental health side of public health and I'm here today to speak about a few of those topics.

Chronic diseases of environmental origin are an increasing problem in New York State and they include asthma, lead poisoning, obesity, cancers of all kinds, birth defects, autoimmune disease, neurological disorders, multiple chemical sensitivities; a myriad of health concerns including breast cancer. I've had the privilege to speak in front of the Suffolk County Legislature since 1990. I was diagnosed in 1987, so personally I need to tell you I'm very happy to be here in 2006. A lot of my sisters and some brothers diagnosed are not here, but we speak on their behalf as well.

Three million women and men will be living with breast cancer in the United States this year. Two hundred and sixty•nine thousand of those women and men will have invasive breast cancer, that's something that we all don't want to hear. This year alone, over 275,000 women and men will be diagnosed in the United States with breast cancer, and on our Long Island over 2,600 women and men this year will be newly diagnosed with breast cancer.

When we started the movement, the statistics were one in eleven, they are now one in seven. My County definitely has helped to push the issue forward, but we've really only addressed the survivor support service side and access to care side and we need to place more emphasis on causation because these numbers need to go down. Environmental links have already been established for many of these chronic diseases and research is continuing to provide new evidence every day. Outdoor air pollutants, mold, volatile organic compounds contribute to the causation of asthma and

respiratory diseases in children. Twenty•eight percent of developmental disabilities in children such as Dyslexia, Attention Deficit Disorder and mental retardation are due, in part, to environmental causes. I mean, our children are our gold; it's one thing to say women and men, now we're talking about our kids. And that's one of the actual bills that I'm asking you to memorialize today which is •• has to do with our children and the developing female.

We are, in fact, exposed to a minimum of 80,000 synthetic chemicals in our environment and one to three new synthetic chemicals are introduced each year. Fewer than half, 43% of these chemicals that are in use have been tested for their potential toxicity to humans. Given the complexity of scientific research, it may take several decades, longer than I'll be here, to prove that these harmful substances currently being used and discharged into our environment cause these chronic illnesses. In fact, definitive proof may never be forthcoming, given the limitations of epidemiological research to prove their cause and effect relationship. While we delay action, thousands of lives, millions of dollars on health care will be lost.

Legislation promoting the precautionary principal as State law is our hope for the future. These public health laws have already been introduced and passed in the State of Massachusetts as well as the City of San Francisco. The New York State Public Health and Environmental Policy Initiatives that I'm here to speak about today will clearly change the paradigm from a reactive approach to our health towards a proactive or precautionary principal approach. The precautionary principal, which you have a separate sheet on, can be easily defined when an activity raises threats of harm to human health or the environment, precautionary measures must be taken before we establish scientific certainty. It's commonly referred to as a better•safe•than•sorry approach.

In April, 2005, I was privileged, as founder of the Prevention is the Cure Organization, to introduce, with Assemblyman Tom DiNapoli and New York State Senator Carl Marcellino, a package of three bills. We collectively call it the Public Health and Environment Protection Policy Initiatives; there's a separate sheet of paper that will give you the summary sheet and I don't need to go over the numbers with you. But the three bills, it's a very

comprehensive bill because we've taken where Massachusetts has lead us and we've taken where the City of San Francisco is leading us and saying, "Well, okay, we might not be the first to do it in New York State, but we're going to have the best and the most comprehensive plan." So we separated it into three segments; the Public Health Protection Act, you have a copy; the Safe and Sustainable Procurement Act, which I refer to as the meat of the bill; and the Environment and Health Tracking Systems Act.

Over the past 17 years I've had the opportunity to speak before you and today I am really privileged to ask you to memorialize these bills and help drive these issues forward. You, my County, those before you and I think I know most of you here, yet not as well as I would like to, I would love the opportunity to speak to every one of you, whether or not you represent Huntington or not, to thank you for the bills that you have already led the charge, been on the cutting edge and developed great environmental policy; the styrofoam ban, the hand•held cell phone ban, the mercury•free vaccine in County facilities, the phase•out of pesticides on Suffolk County properties and our great water testing program here in Suffolk County which is recognized as the best in the state. I'm very proud to be a Suffolk County resident and that's because of Legislators like you.

Let's move on. I've asked that the series of packets that you have be placed in the order that I'm going to speak, but if not I'll give you a moment to find out it. The next thing I want to go over is the memo of support of the specific bills which are known as the Public Health and Environment Protection Policy Initiatives, and there we are going to be talking about the summary of provisions.

The first bill, the Public Health Protection Act, really is just letting us know what the precautionary principal is about, and I discuss that on the last page, that we've got to be more proactive and not reactive in our approach to public health. And basically I always end most of my talks, but I'll sort of weave it through today's talk by saying we have to stop allowing industry to dictate public health. If we can really frame our approach to public health in that way, I think we can evaluate our successes along the way. We know that industry is not as concerned with health as we are as stakeholders in public health; I don't know where industry is but they're on another planet

which I think they're discussing now in Prague.

The meat of the bill, as I mentioned before, is the Safe and Sustainable Procurement Act, and what that is •• what that, in a nutshell is •• hold on. Bear with me, bear with me. It is that New York State will take a look at all the purchases they make and ensuring their safety for all the constituents of New York State. In doing so, they are actually going to engage us in economic change, because we do have products which I've also given you a list of that are ready to be put on the market and utilized so that we ensure and encourage new business, new business that does not include toxic, synthetic, harmful substances. So New York State is •• it's in the process now, I spoke to some people up in the State. While the exact process about how they're going to do it is still being hashed out, it is their hope that the final result of the Safe and Sustainable Procurement Act is to encourage new business that does not allow toxic substances out on the market.

Any questions about those two bills before I get to the last of the bill which is the Environmental Health Tracking ••

CHAIRMAN MYSTAL:

Finish and then we'll have questions.

MS. MILLER:

Okay.

CHAIRMAN MYSTAL:

Finish altogether and then we'll ask questions.

MS. MILLER:

Okay. So the last of the bills of the Public Health and Environment Policy Initiatives that I'm asking you to support is the called the Environmental Health Tracking Act. This bill was actually introduced by David Kune and James Alesi, Upstate Assemblyman and Senators in 2000 and reintroduced as part of our package in 2005. Its purpose is to provide continually updated database to track and evaluate a variety of chronic diseases in relationship to environmental exposures, to make that data available to the public in an accessible and usable format and to ultimately provide such data

to a board of advisors within the Department of Environmental Conservation. This information will be used to examine the relationships between chronic disease and the environment. These are the three bills that our State will need your support to help champion.

I have already •• I've been sort of •• is lobbying sort of a bad word? But I've been going to the Long Island Women's Agenda and large groups making them aware of these bills, giving them the full package and language of the bills which I have given you to look over and to critique, and to ultimately support. We must make a difference, we must change the health paradigm. We cannot continue to be reactive, we owe it to our future generation. And then I'll go on with my next topic after any questions.

CHAIRMAN MYSTAL:

No, go ahead.

MS. MILLER:

Go right through?

CHAIRMAN MYSTAL:

Go right through.

MS. MILLER:

Okay. So the next thing I've been asked to speak about is the Breast Cancer and Environmental Research Act. I need to tell you, I've lived in Huntington for 42 years. My husband has his own business, he repairs and services washing machines; he's 65, it's not an easy job, so he's your Maytag man that lies on your floors and make sure that your washing machine and dryer is working. I was an interior designer for many years, I enjoyed it very much, but became an advocate in the late 80's. We do not have a lot of money, but I am totally, totally rich in experience.

I'm privileged to serve with the Suffolk County Legislature and your County Executive as the Chair of the Cancer Committee. I was appointed by New York State to be one of three advocates that are on the Breast Cancer Education and Advisory Council. I was the woman who gave testimony before Congress that got the \$30 million Long Island Breast Cancer Study

project. And no matter what you've heard, we changed the paradigm of health and got a seat at the table with researchers and policy makers and all of that happened without any connection or any money whatsoever.

I still serve to an advisor, as an advisor to the Director of the National Institute of Environmental Health Sciences. There is now a \$35 million project that's going on, we're in our third year, it's looking at early stage development of the mammary gland and how, in a longitudinal study, that means a long-term study, we can see the cause and effect relationship from in utero. Women exposed to certain toxic substances, perhaps the genetic mutations of their children, when these children first go through puberty, and we're finding that they're going through puberty at age five and six, that's alarming. And when the study continues, and I am passionate on getting more funding for that Federal study, we will be looking at these same mothers and babies moving on into adulthood and we will see how many of these girls do develop breast cancer. Because it's only through these long, longitudinal studies that we can ever see the cause and effect relationship between these hormonally driven cancers and our environment.

So the Breast Cancer and Environmental Research Centers, of which I am chair of the working group working directly with the NIH, right now is a seven year project, it's jointly funded by the NIEHS as well as the National Cancer Institute. The centers will study the impacts of prenatal to adult environmental exposures that will predispose women to breast cancer. Functioning as a consortium of basic scientists, epidemiologists, research translational units and community advocates within and across the centers, BCERC, that's the breast Cancer and Environmental Centers, will investigate mammary gland development in animals and young girls to determine vulnerability to environmental agents that may influence breast cancer development in adulthood.

The overall outcomes of the BCERC are to develop public health messages designed to educate young girls and women who are at high risk of breast cancer about the roles of specific environmental stressors in breast cancer, how to reduce our exposures to those stressors. These public health messages, which will be ongoing, we're not going to wait until the girls are 18 years old, will be based on the integration of basic biological, toxicological

and epidemiologic data.

The research to be conducted by the centers will revolve around a hypotheses that there are periods of vulnerability in the development of the mammary gland when exposures to environmental agents may impact the breast in many ways that can influence the breast cancer risk in adulthood. The centers will be working in close collaboration to pursue two specific approaches to this hypotheses. They're going to be using rat and mouse models because, believe it or not, rat and mice give us two different answers that we need about human exposure, and they're also using epidemiologic studies in human population. The goal of laboratory research projects are to conduct collaborative experiments using these animal and cell culture models to characterize the molecular basis of the mammary gland over the lifespan of the rat or the mouse and to determine how this development may be affected by exposures to environmental agents.

We are now seeing, because we're in our third year, that {bisfenall} or plastic causes mutation in these rats and mice, these female rats and mice. Rats and mice are exactly like human female. So while we cannot do experiments on humans, these rats and mice are providing the connective answers and this is only in the third year of the study. If I look excited, we all should be.

The epidemiologic study will examine the environmental and genetic determinants of puberty by prospectively following several cohorts of young girls. We're doing that in Harlem with the Latino population because, remember, this is a study that translates from Cincinnati to Michigan, from Calstate University at San Francisco to Fox Chase, Mt. Sinai. I am so privileged to be part and parcel, interacting with the most brilliant minds in the country that really have their eye on the prize of changing the paradigm of public health.

The seven year, \$40 million Federal study will include many stakeholders, researchers, medical professionals, environmental groups, health regulatory agencies, consumers. Let me see, where am I? Okay, so I am asking for your continued support for these studies.

Now, the enactment of the Breast Cancer Environmental Research Act which is specifically on the agenda today. I wanted to start off with the centers which are in the third year and then move in to where you asked me to speak because I need to bridge a gap of understanding that the public is not aware of.

The National Breast Cancer Coalition in 2000 was part of an educational consortium with the National Cancer Institutes and the NIEHS. They devised that there should be centers that concentration on causation and research that looks at causation of disease, not bench to bedside treatment and cure; different, both needed but different. Fran Visco and the NBCC have been struggling for six years trying to get support to get these centers off the ground. In the meantime, you know how it always boils down to one person who really wants to make a difference? In 2000, a Dr. Ken Olden, into his eighth of 12 years as the Director of the NIEHS, said, "Hell, I am not going to wait for Federal approval. I am going to take \$30 million of my NIEHS money and I'm going to launch this kind of an approach."

So the centers that I just spoke about that is in its third year is an ongoing, wonderful project that needs your support. What you have asked me to memorialize is not necessarily funding this project, it is to take the concept of doing a consortium approach, not one institute looking in the magnifying glass but the best of the country around the globe, collect data, bring all the stakeholders into the center and find out what causes disease. While I support and I am asking you to memorialize the 2005, which is on your agenda, Breast Cancer Act, I want you to realize that these are overlapping but two different research projects, so I am asking you to do both. I'm done except for questions.

CHAIRMAN MYSTAL:

Thank you. Legislator Eddington had a couple of questions for you. Anybody else?

LEG. EDDINGTON:

Yes, thank you for your presentation. And I think it's very timely because I think you know that we have tried to be proactive and precautionary by passing Resolution No. 423 which establishes a County policy permitting

leaves of absence for Breast Cancer and Prostate Cancer Screening, and you brought that back to my mind that we did that on March 16th. And I don't know if it would be the County Executive's Office or the Health Department, but I'd like to know has this resolution been implemented? Because it's great to pass it but is anybody taking advantage of it? So I really don't know, is there anyone from the Health Department that can answer that or the County Executive?

MS. MILLER:

Well, we have my best friend Terrence Smith in the back who is head of the Dolan Center and he might want to address that.

LEG. EDDINGTON:

See, I'm wondering that •• I guess I'm just going to ask the question, that I'd like to know if it's being implemented and who's responsible to grant the leave?

CHAIRMAN MYSTAL:

The department.

LEG. EDDINGTON:

And then have the County employees been informed? Because you bring it back to my mind, we passed legislation but is anybody taking advantage of it, does anybody know about it?

CHAIRMAN MYSTAL:

That's the more important question, does anybody know about it.

LEG. EDDINGTON:

So I'm going to address these questions, I guess, there's no one here that can answer, but I'll be talking to the County Executive's Office and finding out.

MS. MILLER:

And I would like to be able to speak with you about that.

LEG. EDDINGTON:

Absolutely. Thank you, and thank you for bringing that up to my mind. Thank you.

MS. MILLER:

Good.

CHAIRMAN MYSTAL:

Legislator Stern.

LEG. STERN:

Thank you, Mr. Chairman. And welcome; great to have you here today

MS. MILLER:

Thank you. Thank you for the invitation.

LEG. STERN:

Sure. I have a question regarding one of the provisions within the New York State legislation, and I'm looking to the New York State Public Health Protection Act, part of the initiative, and that is the right to know and, of course, providing information and information is so key to prevention. I was wondering what your thoughts were on the right to know and the fact that of course people should have a right to know complete and accurate information on the potential human health and environmental impacts associated with X, Y and Z. You know we do SEQRA evaluations and before projects go forward we're given the opportunity to take a look at the effects of various things on the environment, but not necessarily on public health. And so I wanted to see, maybe you had some thoughts on what our right to know should be and how best government or private sector would go about informing area residences as projects go forward.

MS. MILLER:

I'm probably going to shoot myself in the foot by making this statement, but I have to make it this way. Women are by nature, by nature, caregivers. So what do we think of? We think about protecting our family, our children. And most mothers will tell you, you must provide me with the information because I want to make those choices for my children. I want information

as it's coming down the pike. Trust me as a mother, I won't go flailing in the street totally fearful. I have intelligence. If there are health threats that are imminent, let me know that. We have •• we have the computer, we can investigate our best choices. We have people in this country that mothers can go to to choose where they want to take information from and provide that for our families. So if I've •• if I've received your question correctly, we do not have enough forthcoming information, it's being held.

For instance, the DOH report on the mapping that showed a higher incidence in Mt. Sinai and Coram; Sara Anker is the champion there, we're all networking together. Sara's questions; "Are they looking under every rock? You know, give us information. We're a stakeholder, help us." And all of a sudden the DOH, unbeknownst to all of us activists, most of all Sara who lives in that area, got this reassuring message that there is no environmental causes in Suffolk County in those areas. Reassuring? I would have preferred that message say, "While we cannot connect the dots now about why there is such high incidents of breast cancer in Coram, Port Jefferson and Mount Sinai, we are committed to continue to look under every rock and will provide continuous information to our constituency about what we find." Reassuring messages are not going to be acceptable by the young mother anymore, they are not trusting the agencies and government and EPA and FDA, they are not trusting these agencies because they're not watching our back. Did I sort of answer that question or no?

LEG. STERN:

In part, but let me ask you this. If there is that suspicion or lack of confidence in accurate information coming out from governmental entities at any level, when you look at the legislation and the public's right to know where it states that, "The burden to supply this information lies with the proponent or the manufacture," how is there going to be any more trust in that information coming from a proponent or a manufacturer, much less government?

MS. MILLER:

I think because one of the things that we're working on as part of this bill is to have that kind of •• going on what Ken Olden, a Director Emeritus had put together, to make sure that the meetings that make these decisions

have all the stakeholders there and that we do not sign these confidentiality forms preventing us from being whistle blowers. So basically we really can create change if we are given an opportunity to work in a very communicative, forthcoming, forthright manner. It's still a work in progress. Certainly I, at the very least, trust industry, so it's a good point.

LEG. STERN:

Thank you.

MS. MILLER:

Any other questions?

CHAIRMAN MYSTAL:

Thank you. Legislator Romaine.

LEG. ROMAINE:

Yes. You talked about the State legislation that would potentially eliminate the State purchasing anything that would be hazardous to health and you had a list of that; do you think it would be advisable for the County to adopt such legislation on a County basis?

MS. MILLER:

Yes.

LEG. ROMAINE:

Could I ask Counsel; Ian, that means you. Counsel, if you would be so kind as to meet with Karen afterwards and to get that State legislation and a list of harmful potential so that it could be drafted into legislation that we could replicate whatever efforts are being made on the State level? We could actually •• we act much faster than the State Legislature which sometimes doesn't act at all. We could replicate that effort and have that legislation come before, I'd like to sponsor that legislation. So if you could meet with Karen briefly after this and then speak with me in my office either later this afternoon if I get to Riverhead or tomorrow, I would appreciate that. Thank you.

MS. MILLER:

Thank you.

LEG. ROMAINÉ:

I thought I would do that because we can certainly act faster. I do not believe we're preempted from acting on this and we can certainly have a policy in place for this County that would be beneficial to all that could potentially be harmed by this disease through environmental causes. Thank you.

MS. MILLER:

Thank you.

CHAIRMAN MYSTAL:

Thank you very much, Ms. Miller. Thank you very much.

MS. MILLER:

Thank you very much.

CHAIRMAN MYSTAL:

Does anybody else want to address committee? Anybody else? Okay, we're going to go straight to the agenda.

Tabled Resolutions

On your agenda you have **1226, that has been stricken or withdrawn.** We passed a bill already.

LEG. ROMAINÉ:

I'll move to table this.

CHAIRMAN MYSTAL:

I thought it was stricken because we already passed a bill.

LEG. ROMAINÉ:

Was it? No, no, we passed the ••

CHAIRMAN MYSTAL:

It died.

LEG. ROMAINE:

Oh, it did die. Oh, okay.

CHAIRMAN MYSTAL:

We passed another bill.

LEG. ROMAINE:

All right.

CHAIRMAN MYSTAL:

But we did pass the bill to create that already.

LEG. ROMAINE:

Yes, the County wide, not the east end.

CHAIRMAN MYSTAL:

County wide.

IR 1740•06 • Amending Resolution No. 386•2006 to establish a new fee policy for the Suffolk County Tobacco Cessation Program (Alden).

I have been asked by the sponsor to table this resolution. I'll make the motion to table.

LEG. EDDINGTON:

Second.

CHAIRMAN MYSTAL:

Seconded by Legislator Eddington. All in favor? Objections? Abstention?
The motion is tabled (VOTE: 5•0•0•0).

1932•06 • Approving the appointment of Dorothy A. Wendel to the Suffolk County Disabilities Advisory Board • Group D (County Executive). Motion to approve.

LEG. EDDINGTON:

Second.

CHAIRMAN MYSTAL:

Seconded by Legislator Eddington.

LEG. KENNEDY:

Is it a reappointment?

CHAIRMAN MYSTAL:

Is it a reappointment?

LEG. BARRAGA:

No.

CHAIRMAN MYSTAL:

No, it's a new appointment. I think she already ••

LEG. KENNEDY:

We don't have her here?

CHAIRMAN MYSTAL:

I don't think she's here. I thought the committee had already •• did she come at any time to the committee? I think she's coming the day of the meeting next week.

LEG. KENNEDY:

Is that it? Okay.

CHAIRMAN MYSTAL:

Well, she better, somebody should tell her. Is anybody here from the County Executive? Please let ••

MR. CHAMBERLAIN:

Yes. It's Brendan Chamberlain, County Executive Assistant. I believe Mrs.

Wendel is going to appear before the General meeting.

CHAIRMAN MYSTAL:

The full committee. Okay, thank you, because she needs to appear. Thank you very much.

MR. CHAMBERLAIN:

We'll make sure that she's here.

CHAIRMAN MYSTAL:

Okay. Motion to approve, the motion has been made. All in favor? Opposed? Abstentions? **Approved (VOTE: 5•0•0•0).**

1952•06 • Adopting Local Law No. 2006, a Local Law to require proper supervision at hotel and motel swimming pools (Cooper). This motion has to be tabled for a public hearing.

LEG. EDDINGTON:

Second.

CHAIRMAN MYSTAL:

Motion to table by Legislator Eddington, seconded by Legislator Stern. All in favor? Opposed? Abstentions? **Tabled (VOTE: 5•0•0•0).**

1971•06 • Adopting Local Law No. 2006, A Local Law strengthening smoking prohibitions at Suffolk County Facilities (Presiding Officer Lindsay). Also has to be tabled for a public hearing. Motion to table by Legislator Eddington, second by Legislator Stern. Call the vote. All in favor? Opposed? Abstentions. **The motion is tabled (VOTE: 5•0•0•0).**

2005•06 • Amending the 2006 Adopted Operating Budget to accept and appropriate additional 100% State aid from the New York State Office of Alcoholism and Substance Abuse Services to the Suffolk County Department of Health Services for the SCO Family of Services for staff recruitment and retention (County Executive). This bill normally we would just approve pro forma, but there is a problem, there is

no fiscal statement for this bill. We didn't receive a fiscal statement, even though it's a 100% grant.

LEG. ROMAINE:

Motion to approve without recommendation.

CHAIRMAN MYSTAL:

We can't, we can't do anything on that bill unless we have •• I'm being advised by Counsel; do we have a fiscal statement?

MR. ORTIZ:

This was done by the County Executive, you'd have to ask them.

CHAIRMAN MYSTAL:

County Exec, anybody? Well, we really can't even act, we cannot table it, we cannot do anything to that motion because it's •• we have to table it, we cannot do anything.

MS. ORTIZ:

Ben is outside.

CHAIRMAN MYSTAL:

Ben is right here, I'm going to try to see if Ben •• Ben, we have a slight problem. It's a 100% grant but we can't approve it unless we have a fiscal statement, unless you have it with you.

MS. ORTIZ:

2005.

MR. ZWIRN:

Yeah, absolutely, and we concur with the policy. I have to go check to see why it's not there. I mean, it's a grant so it should be a pretty easy one to do.

CHAIRMAN MYSTAL:

Yeah. So we have a motion to table.

MR. ZWIRN:

If it's time sensitive we'll bring it back with a ••

CHAIRMAN MYSTAL:

Yeah, we can always call it and discharge it.

MR. ZWIRN:

We'll bring it back with a CN or we'll discharge it.

CHAIRMAN MYSTAL:

We can discharge it on Tuesday.

MR. ZWIRN:

Okay. Thank you.

CHAIRMAN MYSTAL:

Motion to table, second by Legislator Stern. All in favor? Opposed? Abstentions? ***Motion to table carries (VOTE: 5•0•0•0).***

2040•06 • Accepting and appropriating 100% funding from the New York State Office of Children and Family Services (OFCS) for improving staff•to•client ratios in the Department of Social Services, Child Protective Services Bureau (County Executive).

Motion to approve.

LEG. EDDINGTON:

Motion.

LEG. STERN:

Second.

CHAIRMAN MYSTAL:

Seconded by Legislator Stern. All in favor? Opposed? Abstentions? Can we put this on the consent calendar? Yes, we can put it on the consent calendar. Thank you.

LEG. KENNEDY:

Mr. Chair?

LEG. ROMAINE:

Mr. Chairman? Oh, I'm sorry.

CHAIRMAN MYSTAL:

Go ahead.

LEG. ROMAINE:

Before we go to the Memorializing Resolutions, I do have one question for Dr. Graham; a very quick question, if he's in the audience.

CHAIRMAN MYSTAL:

Is Dr. Graham in the audience? Yeah, he's here. Dr. Graham, could you please?

LEG. ROMAINE:

As you're coming up let me pose the question. Dr. Graham, is there going to be a change in the Public Health Nursing Director for the Health Department?

CHIEF DEPUTY COMMISSIONER GRAHAM:

Yes. Yes, I'm Dr. Graham, Chief Deputy Health Commissioner of Suffolk county. Yes that is correct. A decision was made and that information was shared with the interested parties involved that the Director of Public Health Nursing would be an individual who would have a managerial style that was more in sync and consistent with the Commissioner's, Dr. Harper, and that was the case.

LEG. ROMAINE:

Have you •• the person that does that now, that person has been •• is that person protected by Civil Service?

CHIEF DEPUTY COMMISSIONER GRAHAM:

Yes, that person, actually we're very pleased to have a very qualified

individual; Ms. Valerie Carter is a highly qualified Public Health Nurse who would accept that position in the interim.

LEG. ROMAINE:

And when is Mrs or Ms. Carter starting her new position?

CHIEF DEPUTY COMMISSIONER GRAHAM:

I believe that begins on Monday, or soon ••

LEG. ROMAINE:

That would start Monday.

CHIEF DEPUTY COMMISSIONER GRAHAM:

Very soon, yes.

LEG. ROMAINE:

And the person that had this •• Ms or Mrs. Carter is currently working as a Public Health Nurse?

CHIEF DEPUTY COMMISSIONER GRAHAM:

That's correct.

LEG. ROMAINE:

And she is qualified, there's a Civil Service exam?

CHIEF DEPUTY COMMISSIONER GRAHAM:

She's highly qualified, she's been one of our qualified Public Health Nurses at the level four, Grade IV, Public Health Nursing, and she's been •• she's very knowledgeable about the bureau and its activities and services it provides.

LEG. ROMAINE:

Does this position require a Civil Service test?

CHIEF DEPUTY COMMISSIONER GRAHAM:

I believe that •• well, currently she's in a position as the Public Health Nurse IV, I think she's Assistant Director of Public Health Nursing.

LEG. ROMAINE:

Right.

CHIEF DEPUTY COMMISSIONER GRAHAM:

So that's a determination up to Civil Service.

LEG. ROMAINE:

Could you get me an answer on whether that appointment requires •• was that off a list, was it an existing Civil Service list, does it require a test, is it a provisional appointment? I mean, if you could get me that answer I'd appreciate it. Essentially, that was my question because I don't think the members of the Health Committee realized that there was going to be a change in the Public Health Nursing Director.

CHAIRMAN MYSTAL:

I was advised.

LEG. ROMAINE:

Oh, you were, okay. Thank you.

LEG. KENNEDY:

Mr. Chair? Can I, if Mr. Romaine is done?

CHAIRMAN MYSTAL:

Since he's here, you might as well continue.

LEG. KENNEDY:

Okay, thank you. Doctor, can you •• I was unaware of the change in the Director for Public Health Nursing. If either yourself or Mr. Zwirn could just indicate what is the management style that's more in line with the Commissioner's perspective?

CHIEF DEPUTY COMMISSIONER GRAHAM:

The management style is an individual who has a very positive, very collaborative outlook in problem solving and we believe that Ms. Carter has that managerial style that's in sync with the Commissioner's.

MR. ZWIRN:

Yeah, if I just might add. You have to be very careful I think when we start talking about personnel matters. And I'm not saying to cut off the debate but go into executive session if it goes too far, because some of this is ••

LEG. ROMAINE:

I was just asking if there was a change.

MR. ZWIRN:

No, and I haven't said anything up until now. I just spoke with the County Attorney who's here today, I just want to be careful, that's all, I don't want to have anybody's reputation be smirched, just be very careful of what we say..

LEG. KENNEDY:

And I appreciate the sensitivity of the topic of discussion. And I guess what I'm then going to ask is is the Commissioner's management style •• how best to pose this? There is a consultant who has been selected in order to review the current operations and the delivery of public health service by the department at this time; is that correct?

CHIEF DEPUTY COMMISSIONER GRAHAM:

That is correct, that was actually finalized in a report of July of 2006 from Dr. Thomas Dennison and we have received that report at this time, just recently.

LEG. KENNEDY:

Oh, I was unaware that that was made available.

CHAIRMAN MYSTAL:

I don't know if it's been made available, this is the first time I'm hearing about it too, so.

LEG. KENNEDY:

Okay.

CHAIRMAN MYSTAL:

It hasn't been made public yet, at least as far as I know.

LEG. KENNEDY:

Without ••

CHAIRMAN MYSTAL:

Mr. Kennedy, let me try to see if I can caution this whole committee. I know it's very tempting, it is very tempting to step in and try to micromanage different departments. I would ask for you guys to refrain from doing that because, you know, policy and change in management, it is the purview of the County Executive and also of the department head. So I would ask you guys, I know we all have our favorite employees that we would like to see heading things and people get, you know, either fired, demoted or changed, that is the purview of the County Executive. So it's like ••

LEG. KENNEDY:

Absolutely, Mr. Chair, and as a matter of fact, I couldn't agree with you more. And as a matter of fact, I think that clearly I've always been an advocate of the separation of powers. As you know, ours is the roll to adopt the policy and the Exec's role is to go ahead and implement that policy, and by no way, shape or form would I pretend that we should have the role of selecting who does or does not deliver the services. However, the policy to go ahead and deliver public health service directly in areas of need and to the level and the magnitude that has been done up to this point, I think it's something that this committee has all embraced and continue to articulate. So my concern goes to does this change in any way effect that policy that broadly and emphatically endorses the delivery of public health service, particularly in areas of need, that's it.

CHAIRMAN MYSTAL:

That's a good question.

MR. ZWIRN:

That's a fair question.

CHAIRMAN MYSTAL:

Dr. Graham, does that change in any way ••

CHIEF DEPUTY COMMISSIONER GRAHAM:

We believe this change will strengthen and enhance those services that are delivered.

CHAIRMAN MYSTAL:

That will remain to be seen by us. You know, if we find out whether or not the change is continuing to implement and enhancing policy and if it doesn't I'm pretty sure we will have all those people ••

LEG. KENNEDY:

Through the chair as well, and not to presume the role of the chair, but I'm hoping that the results of that consultant's report might be able to be made available, I certainly have an interest.

LEG. ROMAINE:

Mr. Chairman?

CHAIRMAN MYSTAL:

I will ask is the Commissioner, I will talk with the Commissioner and see what he thinks of it. I'm not going to guarantee that that report is going to be made public, but I will give you the guarantee that I will talk to the Commissioner about it.

LEG. KENNEDY:

Thank you, Mr. Chair.

LEG. ROMAINE:

Suffice it to say I absolutely agree with your comments and I wasn't attempting to micromanage, I just was attempting to determine if there was a change in leadership and whether that change was a result of the selection from the Civil Service process, period, without naming individuals.

But on another matter, I believe Mr. Kennedy serves with me on Public Works; is there any other member here that serves on Public Works? No. What we get, if we request it, from the Commissioner of Public Works is a monthly report of activities and correspondence that is provided in

excruciating detail about everything that occurs in that department. I have made that request of Dr. Harper if I could have, and I'll make it of Dr. Graham, the Health Department, Department of Health Services prepares a monthly report for the Executive of initiatives, of things of this nature; I would like to get a copy of that as I believe every member of this committee should get a copy of this.

CHAIRMAN MYSTAL:

Legislator Romaine, it will depend if you want it in excruciating detail or just a summary report, there's two different things.

LEG. ROMAINE:

A summary report.

CHAIRMAN MYSTAL:

Excruciating detail means to •• because there is so much that goes on in the Health Department and so much that goes on in the Social Services Department, to ask for excruciating detail ••

LEG. ROMAINE:

No, a summary would be fine, Mr. Chairman.

CHAIRMAN MYSTAL:

We would be like, you know, does the guy who mop the floor show up today?

LEG. ROMAINE:

Right. For •• for example ••

CHAIRMAN MYSTAL:

No, he didn't.

LEG. ROMAINE:

For example, and I'll ask this question; for example, Dr. Graham, do we currently have a contract with Stony Brook University to review the operations of the Health Department?

CHIEF DEPUTY COMMISSIONER GRAHAM:

I can't recall a current contract at this time.

LEG. ROMAINÉ:

We have no contract with Stony Brook ••

MR. ZWIRN:

That's not what he said. He said •• if you listened carefully, he said he can't recall if they have a current contract. Is there one ••

LEG. ROMAINÉ:

That's why I'm reasking the question.

MR. ZWIRN:

Do you have a contract there; I mean, do you have something that we should look at?

LEG. KENNEDY:

Through the Chair, perhaps maybe what Mr. Romaine might be referring to is •• no, I only I know what we did the work with the ambulance service and the EMS. Stony Brook does provide some oversight I think to us, some medical •• doctor consult, remotely from the back of the ambulances and things like that as a result of contract through Dr. Alicandro's unit, I can't remember the unit. That is a contract that's in place, though, I believe, right?

CHIEF DEPUTY COMMISSIONER GRAHAM:

Yes, I believe that's accurate.

LEG. ROMAINÉ:

Just you may not have this at your fingertips, so I will end by asking this. What I would like you to do, Dr. Graham, if it's possible, is review your records •• I mean, Ben can check with the Purchasing Department •• just to see if there is an RFP that has been issued or had been issued in the past or if there's a contract that is pending or is already in place with Stony Brook, not for EMS purposes but to review the operation of one or several of the

divisions of the Department of Health Services such as the Skilled Nursing Facility, such as the clinics, whether there is an evaluation being done, that's what I'm asking. Thank you.

CHAIRMAN MYSTAL:

Thank you. All right, Dr. Graham ••

MR. ZWIRN:

Mr. Chairman, just one second? Renee Ortiz is going to issue the fiscal impact for that bill that you tabled, but it was included in your packets, it was filed with the legislation that came over.

MR. ORTIZ:

It was in there.

CHAIRMAN MYSTAL:

Okay. So can I have a •• okay.

LEG. ROMAINE:

Motion to reconsider.

CHAIRMAN MYSTAL:

Motion to reconsider ••

LEG. STERN:

Second.

CHAIRMAN MYSTAL:

•• made by Legislator Romaine, second by Legislator Stern. Motion to reconsider is before us. All in favor? Opposed? Abstentions? We are •• the bill is before us to reconsider. Can I take a motion to approve?

LEG. EDDINGTON:

Second.

CHAIRMAN MYSTAL:

Motion to approve by Senator Eddington.

LEG. STERN:

Second.

CHAIRMAN MYSTAL:

Legislator Eddington •• I just called you Senator; my God, what a big jump
•• by Legislator Eddington, seconded by Legislator Stern. All in favor?
We're putting this on the consent calendar. All in favor? Opposed?
Abstentions? ***Approved and placed on the consent calendar (VOTE: 5
•0•0•0).***

MR. ZWIRN:

Thank you, Mr. Chairman. I thank the Clerk's Office for helping us on that.
Thank you.

CHAIRMAN MYSTAL:

Thank you.

Memorializing Resolutions

Okay, we are back to the calendar.

***M061 • 2006 • Memorializing Resolution in support of the Breast
Cancer and Environmental Research Act of 2005 (Browning).***

LEG. STERN:

Motion to approve.

CHAIRMAN MYSTAL:

Motion to approve by Legislator Stern, second by Legislator Eddington. All
in favor? Opposed? Abstentions? Motion carries.
Approved (VOTE: 5 • 0 • 0 • 0).

LEG. ROMAINE:

Would the Clerk please list me as a cosponsor?

CHAIRMAN MYSTAL:

M64 • 2006 • Memorializing Resolution in support of "New York State Public Health Protection Act" (Stern).

LEG. STERN:

Motion to approve.

LEG. EDDINGTON:

Second.

CHAIRMAN MYSTAL:

Motion to approve, second by Legislator Eddington. All in favor? Opposed? Abstentions? Motion carries. ***Approved (VOTE: 5 • 0 • 0 • 0).***

LEG. ROMAINE:

Would the Clerk please list me as a cosponsor.

MR. ORTIZ:

Yes.

CHAIRMAN MYSTAL:

M065 • 2006 • Memorializing Resolution in support of the development of an Environmental Health Tracking System (Stern).

LEG. STERN:

Motion to approve.

CHAIRMAN MYSTAL:

Motion to approve by Legislator Stern, seconded by Legislator Eddington. All in favor? Opposed? Abstentions? Motion carried. ***Approved (VOTE: 5 • 0 • 0 • 0).***

LEG. ROMAINE:

Would the Clerk please list me as a cosponsor.

CHAIRMAN MYSTAL:

Okay, these are all the motions that we have. I'll take a motion motion to adjourn.

LEG. STERN:

Motion.

CHAIRMAN MYSTAL:

Seconded. We are adjourned.

(*The meeting was adjourned at 2:14 PM *)

***Legislator Elie Mystal, Chairman
Health & Human Services Committee***

{ } • Denotes Spelled Phonetically